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**FACSIMILE INFORMATION SHEET**

**RESPONSE UNDER 37 C.F.R §1.116  
EXPEDITED PROCEDURE  
GROUP ART UNIT 1617**

Name of Individual: MAIL STOP AF  
Commissioner for Patents

Company: United States Patent and Trademark Office  
City and State: Alexandria, VA

Facsimile Number: 703-872-9306

From: Kirk M. Miles, Esquire

Total Number of Pages: 10

Date Transmitted: May 9, 2005

CV01382K US

Client No.: 4686

File No.: 045584

**Message:**

Application No. 10/057,629  
Inventors: Harry R. Davis  
Filed: January 25, 2002  
Title: USE OF SUBSTITUTED AZETIDINONE COMPOUNDS FOR THE TREATMENT OF  
SITOSTEROLEMIA

Transmittal Form (1p)  
Fee Transmittal 1p. (2x)  
Notice of Appeal (2pp)(3x)

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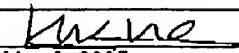
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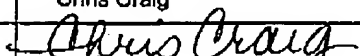
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control number.

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application Number	10/057,629
		Filing Date	January 25, 2002
		First Named Inventor	Harry R. Davis
		Art Unit	1617
		Examiner Name	San Ming R. Hui
Total Number of Pages in This Submission	9	Attorney Docket Number	CV01362K US - 4686-045584

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance communication To Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please Identify below)
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Kirk M. Miles The Webb Law Firm	
Signature		
Date	May 9, 2005	


CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Chris Craig		
Signature		Date	05/09/2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818) <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2005</h3>		<b>Complete if Known</b>					
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number 10/057,629					
		Filing Date January 25, 2002					
		First Named Inventor Harry R. Davis et al.					
		Examiner Name San Ming R. Hui					
		Art Unit 1617					
TOTAL AMOUNT OF PAYMENT (\$ 500.00)		Attorney Docket No. CV01382K US/4686-045584					
<b>METHOD OF PAYMENT (check all that apply)</b> <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 23-0650 Deposit Account Name The Webb Law Firm For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) Under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments							
<b>WARNING:</b> Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Small Entity		Small Entity		Small Entity		
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____
<b>2. EXCESS CLAIM FEES</b>							
						Small Entity	
<u>Fee Description</u>						<u>Fee (\$)</u>	<u>Fee (\$)</u>
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent						50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent						200	100
Multiple dependent claims						360	180
<u>Total Claims</u>		<u>Extra Claims</u>		<u>Fee (\$)</u>		<u>Fee Paid (\$)</u>	
- 20 or HP = _____		x _____		= _____			
HP = highest number of total claims paid for, if greater than 20							
<u>Indep. Claims</u>		<u>Extra Claims</u>		<u>Fee (\$)</u>		<u>Fee Paid (\$)</u>	
- 3 or HP = _____		x _____		= _____			
HP = highest number of independent claims paid for, if greater than 3							
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u>		<u>Extra Sheets</u>		<u>Number of each additional 50 or fraction thereof</u>		<u>Fee (\$)</u>	
- 100 = _____		/ 50 = _____		(round up to a whole number) x _____		= _____	
						<u>Fee Paid (\$)</u>	
<b>4. OTHER FEE(S)</b>						<u>Fee Paid (\$)</u>	
Non-English Specification, \$130 fee (no small entity discount)						_____	
Other: Notice of Appeal \$500.00						500.00	

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent) 37,891	Telephone 412-471-8815
Name (Print/Type)	Kirk M. Miles	Date	May 9, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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MAY 09 2005

Response Under 37 C.F.R. § 1.116  
Expedited Procedure  
Group Art Unit 1617

Application No. 10/057,339  
Paper Dated: May 9, 2005  
Attorney Docket No. CV01382K US/4686-045584

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Application No. : 10/057,629  
Inventors : Harry R. DAVIS  
Filed : January 25, 2002  
Title : USE OF SUBSTITUTED AZETIDINONE  
COMPOUNDS FOR THE TREATMENT OF  
SITOSTEROLEMIA  
Group Art Unit : 1617  
Examiner : San Ming R. Hui  
Customer No. : 28289

FACSMILE NO. 703-872-9306  
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Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

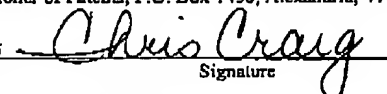
**NOTICE OF APPEAL FROM THE PRIMARY EXAMINER  
TO THE BOARD OF PATENT APPEALS AND INTERFERENCES**

Sir:

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision dated February 8, 2005 of the Primary Examiner finally rejecting claims 1, 8-11, 13-24, 32-45, and 53-56.

I hereby certify that this correspondence is being sent via facsimile to:  
Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

05/09/2005  
Date

  
Signature

Chris Craig

Typed Name of Person Signing Certificate

**Response Under 37 C.F.R. § 1.116  
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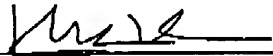
Application No. 10/057,339  
Paper Dated: May 9, 2005  
Attorney Docket No. CV01382K US/4686-045584

This Notice is being timely filed on May 9, 2005 as the due date of May 8, 2005 is a Sunday.

The Commissioner for Patents is hereby authorized to charge any fees which may be required to Deposit Account No. 23-0650 or credit any overpayment to Deposit Account No. 23-0650. The original and two copies of this Notice of Appeal are attached.

Respectfully submitted,

THE WEBB LAW FIRM

By 

Kirk M. Miles  
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Chris Craig

05/10/2005 SDIRETA1 00000054 230650 10057629 Typed Name of Person Signing Certificate  
01 FC:1401 500.00 DA



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